

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SEARCHED

SEARCHED

INDEXED

INDEXED

10/580338

FILED DATE

CLAIMS

	AS FILED		AFTER 1-1 ALLOWANCE		AFTER 2-2 ALLOWANCE			AS FILED		AFTER 1-1 ALLOWANCE		AFTER 2-2 ALLOWANCE	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
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41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			1				TOTAL IND.						
TOTAL DEP.			18				TOTAL DEP.						
TOTAL CLAIMS			19				TOTAL CLAIMS						